Language for S.50 from VT Medical Society regarding re-imbursement

Tim Briglin

Follow up. Start by Friday, April 07, 2017. Due by Friday, April 07, 2017.
You forwarded this message on 4/10/2017 10:08 AM.

follow-up to testimony

Sent: Fri 4/7/2017 11:08 AM

To: Loring Starr

Cc: Bill Lippert; Anne Donahue

Loring,

When given the thumbs up from the Chair to disseminate, here is the language proposed by Jessa of VMS (and UVMMC, BCBS, VAHHS) as an addendum to Sec. 1 of S.50:

Health insurance plans shall provide the same reimbursement rate for services billed using equivalent Current Procedural Terminology codes and modifiers, subject to the terms of the health plan and provider contract, whether the service was provided via in-person contact between a health care provider and patient or via telemedicine. This requirement shall not apply: (a) when services provided by a health insurance plan contracting with a third party telemedicine vendor to provide the health care services; or (b) or when health insurance plans and facilities contract with a third party telemedicine vendor to provide support for telemedicine services.